

2009-125-T

Request for Cancellation of Certificate

File the original with:	Mail or fax a copy to:
Public Service Commission of South Carolina Docketing Department Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 – 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 7-30-09	
Please consider this a request to cancel my:	•
Class C Taxi Certificate	Class A Restricted Certificate
Class C Charter Certificate	
Class C Charter Bus Certificate	RECEIVED
Non-Emergency Certificate	AUG - 3 2009
Class E Household Goods Certificate	T, T, W, W/W
Class E Hazardous Wastes Certificate	***
My Certificate Number is \$109	
(Name of Company)	(If applicable)
1316 B. N. Blvd (Street Address)	(Mailing Address if different from Street Address)
(Street Address) Anderson, SC 29621 (City, State, Zlp Code)	(City, State, Zip Code)
864-934-4274 (Telephone Number)	(Signature)
RECEIVED	Owner (Title)

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ORS Revised 9-22-08

PSC SC DOCKETING DEPT